

|                                 |  |                               |   |
|---------------------------------|--|-------------------------------|---|
| <i>SERFF Tracking Number:</i>   | <i>STLR-125902618</i>                                | <i>State:</i>                 | <i>Arkansas</i>                             |
| <i>First Filing Company:</i>    | <i>Manufacturers Alliance Insurance Company, ...</i> | <i>State Tracking Number:</i> | <i>#? \$?</i>                               |
| <i>Company Tracking Number:</i> | <i>08-0901-AR124</i>                                 |                               |   |
| <i>TOI:</i>                     | <i>17.0 Other Liability-Occ/Claims Made</i>          | <i>Sub-TOI:</i>               | <i>17.0001 Commercial General Liability</i> |
| <i>Product Name:</i>            | <i>08-0901-AR124</i>                                 |                               |   |
| <i>Project Name/Number:</i>     | <i>Independent Rules and LCM's/08-0901-AR124</i>     |                               |   |

## Filing at a Glance

Companies: Manufacturers Alliance Insurance Company, Pennsylvania Manufacturers' Association Insurance Company, Pennsylvania Manufacturers Indemnity Company

|  |                              |   |
|--|------------------------------|---|
| Product Name: 08-0901-AR124                      | SERFF Tr Num: STLR-125902618 | State: Arkansas                           |
| TOI: 17.0 Other Liability-Occ/Claims Made        | SERFF Status: Closed         | State Tr Num: #? \$?                      |
| Sub-TOI: 17.0001 Commercial General Liability Co | Tr Num: 08-0901-AR124        | State Status: Fees verified and received  |
| Filing Type: Rate/Rule                           | Co Status:                   | Reviewer(s): Betty Montesi, Edith Roberts |
|  | Author: Sharon Ellison       | Disposition Date: 12/02/2008              |
|  | Date Submitted: 11/14/2008   | Disposition Status: Filed                 |
| Effective Date Requested (New): 01/01/2009       |                              | Effective Date (New):                     |
| Effective Date Requested (Renewal): 01/01/2009   |                              | Effective Date (Renewal):                 |
| State Filing Description:                        |                              |   |
| no fees required                                 |                              |   |

## General Information

|  |                                       |
|--|---------------------------------------|
| Project Name: Independent Rules and LCM's  | Status of Filing in Domicile: Pending |
| Project Number: 08-0901-AR124  | Domicile Status Comments:             |
| Reference Organization:  | Reference Number:                     |
| Reference Title:   | Advisory Org. Circular:               |
| Filing Status Changed: 12/02/2008  |                                       |
| State Status Changed: 12/02/2008   | Deemer Date:                          |
| Corresponding Filing Tracking Number:  |                                       |
| Filing Description:  |                                       |
| We are filing to expand our currently approved Occurrence forms, rules and LCM's in your state to include Claims-Made for the following companies: |                                       |

Manufacturers Alliance Insurance Company (MAICO);  
 Pennsylvania Manufacturers' Association Insurance Company (PMAIC); and

|                                 |  |                               |   |
|---------------------------------|--|-------------------------------|---|
| <i>SERFF Tracking Number:</i>   | <i>STLR-125902618</i>                                | <i>State:</i>                 | <i>Arkansas</i>                             |
| <i>First Filing Company:</i>    | <i>Manufacturers Alliance Insurance Company, ...</i> | <i>State Tracking Number:</i> | <i>#? \$?</i>                               |
| <i>Company Tracking Number:</i> | <i>08-0901-AR124</i>                                 |                               |   |
| <i>TOI:</i>                     | <i>17.0 Other Liability-Occ/Claims Made</i>          | <i>Sub-TOI:</i>               | <i>17.0001 Commercial General Liability</i> |
| <i>Product Name:</i>            | <i>08-0901-AR124</i>                                 |                               |   |
| <i>Project Name/Number:</i>     | <i>Independent Rules and LCM's/08-0901-AR124</i>     |                               |   |

Pennsylvania Manufactures Indemnity Company (PMIC).

These forms, rules and LCM's will be used in conjunction with ISO's most recent Commercial General Liability forms, rules, loss costs and rating plan filings.

ISO's Division Six is designed for use with either Claims-Made or Occurrence. Therefore, the only revision needed to utilize this structure is to revise our rules by adding a clarification sentence indicating that the following forms apply to Occurrence Version only:

PGL 30 20, Limited Pollution Coverage, located on CG-CW-E-3  
PGL 40 84, Janitorial Services – Limited Pollution Amendment, located on CG-CW-E-3  
PGL 40 24, Hired and Non-Owned Liability Coverage, located on CG-CW-E-3  
PGL 40 50, Notice of Occurrence, located on CG-CW-E-4  
PGL 40 16, Amendment – Non-Cumulation of Each Occurrence Limit of Liability and  
Non-Cumulation of Personal and Advertising Injury Limit, located on CG-CW-E-5  
PGL 20 10, Printer's Errors and Omissions Liability Coverage Form, located on CG-CW-E-6

These are the only revisions to our rule pages, CG-CW-E-1 through 7 (Edition 11.08).

These changes are applicable to all policies effective on or after January 1, 2009.

## Company and Contact

### Filing Contact Information

|  |                             |
|--|-----------------------------|
| Sharon Ellison, Sr. Regulatory Analyst | Sharon_Ellison@pmagroup.com |
| 380 Sentry Parkway                     | (610) 397-5356 [Phone]      |
| Blue Bell, PA 19422-0754               | (610) 397-5100[FAX]         |

### Filing Company Information

|  |                 |                                 |
|--|-----------------|---------------------------------|
| Manufacturers Alliance Insurance Company | CoCode: 36897   | State of Domicile: Pennsylvania |
| 380 Sentry Parkway                       | Group Code: 767 | Company Type:                   |
| P. O. Box 3031                           |                 |                                 |
| Blue Bell, PA 19422-0754                 | Group Name:     | State ID Number:                |

SERFF Tracking Number: STLR-125902618 State: Arkansas  
First Filing Company: Manufacturers Alliance Insurance Company, ... State Tracking Number: #? \$?  
Company Tracking Number: 08-0901-AR124  
TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability  
Product Name: 08-0901-AR124  
Project Name/Number: Independent Rules and LCM's/08-0901-AR124

(610) 397-5462 ext. [Phone] FEIN Number: 23-2086596  
-----  
Pennsylvania Manufacturers' Association CoCode: 12262 State of Domicile: Pennsylvania  
Insurance Company  
380 Sentry Parkway Group Code: 767 Company Type:  
P. O. Box 3031  
Blue Bell, PA 19422-0754 Group Name: State ID Number:  
(610) 397-5462 ext. [Phone] FEIN Number: 23-1642962  
-----  
Pennsylvania Manufacturers Indemnity CoCode: 41424 State of Domicile: Pennsylvania  
Company  
380 Sentry Parkway Group Code: 767 Company Type:  
P. O. Box 3031  
Blue Bell, PA 19422-0754 Group Name: State ID Number:  
(610) 397-5462 ext. [Phone] FEIN Number: 23-2217934  
-----

SERFF Tracking Number: STLR-125902618 State: Arkansas

First Filing Company: Manufacturers Alliance Insurance Company, ... State Tracking Number: #? \$?

Company Tracking Number: 08-0901-AR124

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability

Product Name: 08-0901-AR124

Project Name/Number: Independent Rules and LCM's/08-0901-AR124

## Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

Per Company: No

| COMPANY   | AMOUNT | DATE PROCESSED | TRANSACTION # |
|---|--------|----------------|---------------|
| Manufacturers Alliance Insurance Company                  | \$0.00 | 11/14/2008     |               |
| Pennsylvania Manufacturers' Association Insurance Company | \$0.00 | 11/14/2008     |               |
| Pennsylvania Manufacturers Indemnity Company              | \$0.00 | 11/14/2008     |               |

*SERFF Tracking Number:*      *STLR-125902618*      *State:*      *Arkansas*  
*First Filing Company:*      *Manufacturers Alliance Insurance Company, ...*      *State Tracking Number:*      *#? \$?*  
*Company Tracking Number:*      *08-0901-AR124*  
*TOI:*      *17.0 Other Liability-Occ/Claims Made*      *Sub-TOI:*      *17.0001 Commercial General Liability*  
*Product Name:*      *08-0901-AR124*  
*Project Name/Number:*      *Independent Rules and LCM's/08-0901-AR124*

## Correspondence Summary

### Dispositions

| <b>Status</b> | <b>Created By</b> | <b>Created On</b> | <b>Date Submitted</b> |
|---------------|-------------------|-------------------|-----------------------|
| Filed         | Edith Roberts     | 12/02/2008        | 12/02/2008            |

SERFF Tracking Number: STLR-125902618 State: Arkansas  
First Filing Company: Manufacturers Alliance Insurance Company, ... State Tracking Number: #? \$?  
Company Tracking Number: 08-0901-AR124  
TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability  
Product Name: 08-0901-AR124  
Project Name/Number: Independent Rules and LCM's/08-0901-AR124

## Disposition

Disposition Date: 12/02/2008

Effective Date (New):

Effective Date (Renewal):

Status: Filed

Comment:

Rate data does NOT apply to filing.

### Overall Rate Information for Multiple Company Filings

|   |        |
|---|--------|
| Overall Percentage Rate Indicated For This Filing             | 0.000% |
| Overall Percentage Rate Impact For This Filing                | 0.000% |
| Effect of Rate Filing-Written Premium Change For This Program | \$0    |
| Effect of Rate Filing - Number of Policyholders Affected      | 0      |

SERFF Tracking Number: STLR-125902618 State: Arkansas  
 First Filing Company: Manufacturers Alliance Insurance Company, ... State Tracking Number: #? \$?  
 Company Tracking Number: 08-0901-AR124  
 TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability  
 Product Name: 08-0901-AR124  
 Project Name/Number: Independent Rules and LCM's/08-0901-AR124

| Item Type           | Item Name                                  | Item Status | Public Access |
|---------------------|--|-------------|---------------|
| Supporting Document | NAIC Transmittal                           | Filed       | Yes           |
| Rate                | Commercial Lines Manual Exception<br>Pages | Filed       | Yes           |

|                                 |  |                               |   |
|---------------------------------|--|-------------------------------|---|
| <i>SERFF Tracking Number:</i>   | <i>STLR-125902618</i>                                | <i>State:</i>                 | <i>Arkansas</i>                             |
| <i>First Filing Company:</i>    | <i>Manufacturers Alliance Insurance Company, ...</i> | <i>State Tracking Number:</i> | <i>#? \$?</i>                               |
| <i>Company Tracking Number:</i> | <i>08-0901-AR124</i>                                 |                               |   |
| <i>TOI:</i>                     | <i>17.0 Other Liability-Occ/Claims Made</i>          | <i>Sub-TOI:</i>               | <i>17.0001 Commercial General Liability</i> |
| <i>Product Name:</i>            | <i>08-0901-AR124</i>                                 |                               |   |
| <i>Project Name/Number:</i>     | <i>Independent Rules and LCM's/08-0901-AR124</i>     |                               |   |

## Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: STLR-125902618 State: Arkansas  
 First Filing Company: Manufacturers Alliance Insurance Company, ... State Tracking Number: #? \$?  
 Company Tracking Number: 08-0901-AR124  
 TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability  
 Product Name: 08-0901-AR124  
 Project Name/Number: Independent Rules and LCM's/08-0901-AR124

## Rate/Rule Schedule

| Review Status: | Exhibit Name:                           | Rule # or Page #:     | Rate Action | Previous State Filing Attachments Number:         |
|----------------|---|-----------------------|-------------|---|
| Filed          | Commercial Lines Manual Exception Pages | CG-CW-E-1 through E-7 | Replacement | CG-CW-E-1 thru 7 11.08.pdf Rules Side by Side.pdf |

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Commercial Lines Manual  
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**Division:** Six – Commercial General Liability

## **SECTION I - GENERAL RULES**

### **8. POLICY WRITING MINIMUM PREMIUM**

- |   |          |
|---|----------|
| A. Prepaid Policies   | \$1,000. |
| B. Annual Premium Payment Plan<br>Policies or Continuous Policies | \$1,000. |

### **9. ADDITIONAL PREMIUM CHANGES**

- B. Waive additional premium of \$25 or less.

### **10. RETURN PREMIUM CHANGES**

- B. Waive return premium of \$25 or less. However, any return premium due must be granted if requested by the insured.

### **15. DEDUCTIBLES**

Rule F. is deleted and replaced by the following:

1. To provide coverage according to ISO's rule, use Deductible Liability Insurance Endorsement, CG 03 00.
2. To provide broadened deductible options, attach General Liability Deductible Endorsement, PGL 03 01.

### **16. ADDITIONAL INTERESTS**

#### **B. Additional Charge**

The following are added:

50. For blanket additional insureds where required by construction contract, use **Additional Insureds by Construction Contract, PGL 20 11.**
51. To provide blanket additional insured status for managers or operators of premises or interests from whom premises have been rented or leased on policies covering lessees or tenants, use **Additional Insured – Lessor of Leased Equipment – Automatic Status when Required in a Lease Agreement with You – PGL 40 55.**
52. For managers or operators of premises or interests from whom premises have been rented or leased on policies covering lessees or tenants, use **Additional Insured – Manager or Lessor of Premises – Automatic Status when Required in Agreement with You, PGL 40 10.**
53. To provide the vendor with products liability coverage with respect to claims arising from the named insured manufacturer's or distributor's products, use **Additional Insured –Vendors–Automatic Status when Required in Agreement with You, PGL 40 05.**

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54. For blanket additional insureds where required by construction contract and requiring completed operations coverage, use **Blanket Additional Insureds by Construction Contract – Completed Operations, PGL 20 17.**

## **SECTION II - COVERAGE RULES**

### **36. DESCRIPTION OF ADDITIONAL OPTIONAL ENDORSEMENTS**

#### **C. Exclusion Endorsements**

The following are added:

50. Liability arising from exposure to asbestos may be excluded by attaching **Exclusion – Asbestos, PGL 22 01**, to the Commercial General Liability Coverage Part.
51. Liability arising from exposure to fly ash may be excluded by attaching **Exclusion – Fly Ash, PGL 22 02**, to the Commercial General Liability Coverage Part.
52. Liability arising from lead exposure or contamination may be excluded by attaching **Exclusion – Lead Exposure or Contamination, PGL 21 26**, to the Commercial General Liability Coverage Part.
53. Liability arising from the Avian Flu, exposure to Avian Flu or use of any Avian Flu contaminated products may be excluded by attaching **Exclusion – Avian Flu, PGL 40 26**, to the Commercial General Liability Coverage Part.
54. Liability arising from the sale, manufacturing, handling, distribution, marketing, consumption, ingestion or use of, or exposure to any tobacco or tobacco product may be excluded by attaching **Exclusion – Tobacco, PGL 40 42**, to the Commercial General Liability Coverage Part.
55. Liability arising from the exposure to or inhalation or respiration of chromated copper arsenate (CCA) or products or substances containing CCA or by-products produced from CCA may be excluded by attaching **Exclusion – Chromated Copper Arsenate (CCA), PGL 40 18**, to the Commercial General Liability Coverage Part.
56. Liability arising from the direct or indirect physical contact with vapors, gases, fumes or any particulate matter from welding may be excluded by attaching **Exclusion – Welding, PGL 40 12**, to the Commercial General Liability Coverage Part.

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**E. Coverage Amendment Endorsements**

**1. Pollution Exclusion Options**

The following is added:

- I. To provide limited pollution coverage for contractors, use **Limited Pollution Coverage, PGL 30 20.** (Occurrence Version only)
  - i. The minimum sublimit of coverage is \$100,000/\$100,000. Multiply the CGL charged premium at \$1million/\$2 million by 2%.
  - ii. Other limits available are \$250,000/\$250,000, \$500,000/\$500,000 and \$1,000,000/\$1,000,000. For these limits, multiply the premium developed for the \$100,000/\$100,000 limit by the ISO Table 3 increased limit factor.
  - iii. Package modification factor applies, but no other pricing modifications are to be used.
  - iv. The minimum premium is \$750.

To broaden the pollution coverage provided for janitorial services risks only, use **Janitorial Services – Limited Pollution Amendment, PGL 40 84.** (Occurrence Version only)

50. To amend the definition of “Who Is An Insured”, use **Amendment – Fellow Employee, PGL 00 07.**
51. To eliminate stacking of limits on multiple General Liability policies, use **Changes – Non-Pyramiding of Limits, PGL 22 03.**
52. To broaden coverage to watercraft that the Named Insured does not own which is less than 51 feet use **Broadened Coverage for Non-Owned Watercraft, PGL 40 15.**
53. To broaden the Fire Legal Liability coverage under the policy to include water damage, explosion, and smoke if the smoke arises from the sudden and faulty operation of a heating or cooking unit of a building rented to the Named Insured use **Fire and Water Damage Legal Liability Amendment, PGL 40 20.**
54. To provide hired and non-owned liability coverage in situations where a risk may not have any owned vehicles use **Hired and Non-Owned Liability Coverage, PGL 40 24.** (Occurrence Version only)
55. To address in the policy that the knowledge of an occurrence, claim, or suit by the agent, servant or employee of any insured will not in itself constitute knowledge of the insured unless an officer of the insured had received such notice from the agent, servant or employee use **Knowledge of Occurrence, PGL 40 40.**

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56. To amend the definition of Who Is An Insured to include any organization that an insured newly acquires or forms, other than a partnership, joint venture or limited liability company use **Newly Acquired Organization Amendment, PGL 40 45.**
57. To amend the policy to contemplate the scenario where the insured reports an occurrence to us and it later develops into an actual liability claim, failure to report the occurrence as a liability claim as such will not be considered to be in violation of the duties in the event of a claim as stated in the CGL use **Notice of Occurrence, PGL 40 50.** (Occurrence Version only)
58. To extend coverage for personal property of others in your care, custody or control use **Property Damage Liability Amendment, PGL 40 60.**
59. The Named Insured's failure to disclose hazards existing as of the inception date of the policy shall not by itself prejudice the coverage otherwise afforded by the policy provided such failure is not intentional. Use **Unintentional Failure to Disclose Hazards, PGL 40 65.**
60. To provide coverage for advertising expenses an insured may incur to regain customer faith and approval following a covered incident use **Good Faith Advertising Expense Endorsement, PGL 40 68** which amends the coverage given under the Limited Product Withdrawal Expense endorsement.
61. To broaden the coverage provided under Personal Advertising and Injury coverage to 1) chat rooms and bulletin boards you host; 2) advertisements, links and content to and from other Web sites; 3) Internet copyright and advertisement infringement; and 4) copyright or advertising idea/style infringement offenses committed via e-mail use **Electronic Chatrooms and Bulletin Boards Coverage, PGL 40 76.**
62. To expand the Products-Completed Operations hazard definition with respect to restaurant operations only use **Products Hazard Definition Amendment, PGL 40 74.**
63. To expand coverage by amending the automobile exclusion to include any customer's automobile under your care, custody or control while being parked or stored as part of your business use **Valet Parking Extension Endorsement, PGL 40 70.**
64. To broaden legal liability coverage for theft to include robbery, burglary, theft or mysterious disappearance of tangible property for janitorial services risks only use **Janitorial Services – Theft Legal Liability, PGL 40 82.**
65. To amend the bodily injury definition to include mental injury, use endorsement titled **Mental Injury, PGL 40 86.**

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**F. Amendment of Limits Endorsements**

The following endorsements are added:

50. The Medical Payments Limit is increased from \$5,000 to \$10,000. by using **Increased Medical Payments Limit, PGL 40 30.**
51. The limitation of \$250 is amended to no limit on the cost of bail bonds. And the loss of earnings supplementary payment is increased to \$500 from \$250. by using **Increased Supplementary Payments, PGL 40 35.**
52. Clarification regarding the exhaustion of the Each Occurrence Limit and the Personal and Advertising Injury Limit is stated in the **Amendment – Non-Cumulation of Each Occurrence Limit of Liability and Non-Cumulation of Personal and Advertising Injury Limit, PGL 40 16.** (Occurrence Version only)
53. To increase the Property Damage Liability aggregate limit to \$1,000,000 for janitorial services risks only, use **Janitorial Services – Property Damage Amendment, PGL 40 81.**

**43. EMPLOYEE BENEFITS LIABILITY COVERAGE**

Rule D. is deleted and replaced by the following:

**D. Premium Calculation**

1. 

| <u>Number of Employees</u> | <u>Annual Basic Limit RATE per employee</u> |
|----------------------------|---|
| First 5,000                | .090  |
| Next 5,000                 | .068  |
| Over 10,000                | .015  |
2. For limits other than the basic limit, multiply the basic limits premium by the increased/decreased limits factor from Table 2. Of ISO's Rule 56.
3. The minimum premium for this coverage is \$500, which is in addition to the Policy Writing Minimum Premium.
4. No modifications apply to the premium charged for this coverage.

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The following Section is added:

**SECTION V – ADDITIONAL COVERAGES**

The following are used in conjunction with the ISO Program:

**1. PRINTER'S ERRORS AND OMISSION LIABILITY COVERAGE**

- A.** This coverage part provides insurance for liability arising from the insured's negligent act, error or omission in providing printing services. Use Printer's Errors and Omissions Liability Coverage Form, PGL 20 10. (Occurrence Version only)
- B.** Hazard Levels, Rates and Minimum Premiums

| Hazard Level                      | Correction of Work INCLUDED | Correction of Work EXCLUDED | Minimum Premium |
|-----------------------------------|-----------------------------|-----------------------------|-----------------|
| <b>Rates per \$1,000 of Sales</b> |                             |                             |                 |
| <b>Low</b>                        | <b>.108</b>                 | <b>.038</b>                 | <b>\$150.</b>   |
| <b>Medium</b>                     | <b>.180</b>                 | <b>.063</b>                 | <b>\$250.</b>   |
| <b>High</b>                       | <b>.252</b>                 | <b>.088</b>                 | <b>\$500.</b>   |

**Note:** Increased Limits Table (2) applies.

Hazard Levels Eligibility Criteria

Low Hazard:

- No print jobs prepared through typesetting work.
- No Financial documents print jobs.
- Does not use subcontractors for printing jobs.
- Includes, but is not limited to, office stationary, leaflets, flyers, non-promotional (advertising) materials, Kinko's-like printers, etc.

Medium Hazard:

- Any risk that falls outside of the eligibility criteria for High or Low Hazard risks.
- Includes, but is not limited to the following:
  - Transportation tickets (air, bus, rail, boat)
  - Tickets of admission (sporting events, theaters, amusement parks)
  - Election ballots
  - Statements (bank and annual reports)
  - Labels (directions, instructions, warning)
  - Checks – other than described in high hazard
  - Promotional material – excluding coupons and vouchers
  - Newspapers

High Hazard:

- More than 35% of print jobs are done by typeset method.
- More than 35% of revenue is generated through the printing of financial, technical, or legal work.
- More than 50% of work is subcontracted to others to print.

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- Includes, but is not limited to money orders, securities, travelers checks, drafts, stamps, coupons, pharmaceuticals, lottery tickets, drugs, traffic signs.

**2. PMA *Elite* Product**

**A. Description**

There is a charge associated with the automatic additional coverages provided in the PMA *Elite* product.

**B. Premium Determination**

To calculate the additional premium charge, multiply the total general liability premium by 3%.

# Text and Font Comparison

## Documents Compared

CG-CW-E Ed 11.07.pdf

CG-CW-E-1 thru 7 11.08.pdf

## Summary

31 word(s) added

7 word(s) deleted

2035 word(s) matched

13 word(s) differ in font

To see where the changes are, please scroll down.

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## **SECTION I - GENERAL RULES**

### **8. POLICY WRITING MINIMUM PREMIUM**

- |   |          |
|---|----------|
| A. Prepaid Policies   | \$1,000. |
| B. Annual Premium Payment Plan<br>Policies or Continuous Policies | \$1,000. |

### **9. ADDITIONAL PREMIUM CHANGES**

- B. Waive additional premium of \$25 or less.

### **10. RETURN PREMIUM CHANGES**

- B. Waive return premium of \$25 or less. However, any return premium due must be granted if requested by the insured.

### **15. DEDUCTIBLES**

Rule F. is deleted and replaced by the following:

1. To provide coverage according to ISO's rule, use Deductible Liability Insurance Endorsement, CG 03 00.
2. To provide broadened deductible options, attach General Liability Deductible Endorsement, PGL 03 01.

### **16. ADDITIONAL INTERESTS**

#### **B. Additional Charge**

The following are added:

50. For blanket additional insureds where required by construction contract, use **Additional Insureds by Construction Contract, PGL 20 11.**
51. To provide blanket additional insured status for managers or operators of premises or interests from whom premises have been rented or leased on policies covering lessees or tenants, use **Additional Insured – Lessor of Leased Equipment – Automatic Status when Required in a Lease Agreement with You – PGL 40 55.**
52. For managers or operators of premises or interests from whom premises have been rented or leased on policies covering lessees or tenants, use **Additional Insured – Manager or Lessor of Premises – Automatic Status when Required in Agreement with You, PGL 40 10.**
53. To provide the vendor with products liability coverage with respect to claims arising from the named insured manufacturer's or distributor's products, use **Additional Insured –Vendors–Automatic Status when Required in Agreement with You, PGL 40 05.**

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## **SECTION I - GENERAL RULES**

### **8. POLICY WRITING MINIMUM PREMIUM**

- |   |          |
|---|----------|
| A. Prepaid Policies   | \$1,000. |
| B. Annual Premium Payment Plan<br>Policies or Continuous Policies | \$1,000. |

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50. For blanket additional insureds where required by construction contract, use **Additional Insureds by Construction Contract, PGL 20 11.**
51. To provide blanket additional insured status for managers or operators of premises or interests from whom premises have been rented or leased on policies covering lessees or tenants, use **Additional Insured – Lessor of Leased Equipment – Automatic Status when Required in a Lease Agreement with You – PGL 40 55.**
52. For managers or operators of premises or interests from whom premises have been rented or leased on policies covering lessees or tenants, use **Additional Insured – Manager or Lessor of Premises – Automatic Status when Required in Agreement with You, PGL 40 10.**
53. To provide the vendor with products liability coverage with respect to claims arising from the named insured manufacturer's or distributor's products, use **Additional Insured –Vendors–Automatic Status when Required in Agreement with You, PGL 40 05.**

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**Companies:** All Licensed Companies

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54. For blanket additional insureds where required by construction contract and requiring completed operations coverage, use **Blanket Additional Insureds by Construction Contract – Completed Operations, PGL 20 17.**

## SECTION II - COVERAGE RULES

### 36. DESCRIPTION OF ADDITIONAL OPTIONAL ENDORSEMENTS

#### C. Exclusion Endorsements

The following are added:

- 50. Liability arising from exposure to asbestos may be excluded by attaching **Exclusion – Asbestos, PGL 22 01**, to the Commercial General Liability Coverage Part.
- 51. Liability arising from exposure to fly ash may be excluded by attaching **Exclusion – Fly Ash, PGL 22 02**, to the Commercial General Liability Coverage Part.
- 52. Liability arising from lead exposure or contamination may be excluded by attaching **Exclusion – Lead Exposure or Contamination, PGL 21 26**, to the Commercial General Liability Coverage Part.
- 53. Liability arising from the Avian Flu, exposure to Avian Flu or use of any Avian Flu contaminated products may be excluded by attaching **Exclusion – Avian Flu, PGL 40 26**, to the Commercial General Liability Coverage Part.
- 54. Liability arising from the sale, manufacturing, handling, distribution, marketing, consumption, ingestion or use of, or exposure to any tobacco or tobacco product may be excluded by attaching **Exclusion – Tobacco, PGL 40 42**, to the Commercial General Liability Coverage Part.
- 55. Liability arising from the exposure to or inhalation or respiration of chromated copper arsenate (CCA) or products or substances containing CCA or by-products produced from CCA may be excluded by attaching **Exclusion – Chromated Copper Arsenate (CCA), PGL 40 18**, to the Commercial General Liability Coverage Part.
- 56. Liability arising from the direct or indirect physical contact with vapors, gases, fumes or any particulate matter from welding may be excluded by attaching **Exclusion – Welding, PGL 40 12**, to the Commercial General Liability Coverage Part.

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54. For blanket additional insureds where required by construction contract and requiring completed operations coverage, use **Blanket Additional Insureds by Construction Contract – Completed Operations, PGL 20 17.**

## SECTION II - COVERAGE RULES

### 36. DESCRIPTION OF ADDITIONAL OPTIONAL ENDORSEMENTS

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52. Liability arising from lead exposure or contamination may be excluded by attaching **Exclusion – Lead Exposure or Contamination, PGL 21 26**, to the Commercial General Liability Coverage Part.
53. Liability arising from the Avian Flu, exposure to Avian Flu or use of any Avian Flu contaminated products may be excluded by attaching **Exclusion – Avian Flu, PGL 40 26**, to the Commercial General Liability Coverage Part.
54. Liability arising from the sale, manufacturing, handling, distribution, marketing, consumption, ingestion or use of, or exposure to any tobacco or tobacco product may be excluded by attaching **Exclusion – Tobacco, PGL 40 42**, to the Commercial General Liability Coverage Part.
55. Liability arising from the exposure to or inhalation or respiration of chromated copper arsenate (CCA) or products or substances containing CCA or by-products produced from CCA may be excluded by attaching **Exclusion – Chromated Copper Arsenate (CCA), PGL 40 18**, to the Commercial General Liability Coverage Part.
56. Liability arising from the direct or indirect physical contact with vapors, gases, fumes or any particulate matter from welding may be excluded by attaching **Exclusion – Welding, PGL 40 12**, to the Commercial General Liability Coverage Part.

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**E. Coverage Amendment Endorsements**

**1. Pollution Exclusion Options**

The following is added:

- I. To provide limited pollution coverage for contractors, use **Limited Pollution Coverage, PGL 30 20.**
  - i. The minimum sublimit of coverage is \$100,000/\$100,000. Multiply the CGL charged premium at \$1million/\$2 million by 2%.
  - ii. Other limits available are \$250,000/\$250,000, \$500,000/\$500,000 and \$1,000,000/\$1,000,000. For these limits, multiply the premium developed for the \$100,000/\$100,000 limit by the ISO Table 3 increased limit factor.
  - iii. Package modification factor applies, but no other pricing modifications are to be used.
  - iv. The minimum premium is \$750.

To broaden the pollution coverage provided for janitorial services risks only, use **Janitorial Services – Limited Pollution Amendment, PGL 40 84.**

50. To amend the definition of "Who Is An Insured", use **Amendment – Fellow Employee, PGL 00 07.**
51. To eliminate stacking of limits on multiple General Liability policies, use **Changes – Non-Pyramiding of Limits, PGL 22 03.**
52. To broaden coverage to watercraft that the Named Insured does not own which is less than 51 feet use **Broadened Coverage for Non-Owned Watercraft, PGL 40 15.**
53. To broaden the Fire Legal Liability coverage under the policy to include water damage, explosion, and smoke if the smoke arises from the sudden and faulty operation of a heating or cooking unit of a building rented to the Named Insured use **Fire and Water Damage Legal Liability Amendment, PGL 40 20.**
54. To provide hired and non-owned liability coverage in situations where a risk may not have any owned vehicles use **Hired and Non-Owned Liability Coverage, PGL 40 24.**
55. To address in the policy that the knowledge of an occurrence, claim, or suit by the agent, servant or employee of any insured will not in itself constitute knowledge of the insured unless an officer of the insured had received such notice from the agent, servant or employee use **Knowledge of Occurrence, PGL 40 40.**

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**E. Coverage Amendment Endorsements**

**1. Pollution Exclusion Options**

The following is added:

- I. To provide limited pollution coverage for contractors, use **Limited Pollution Coverage, PGL 30 20.** (Occurrence Version only)
  - i. The minimum sublimit of coverage is \$100,000/\$100,000. Multiply the CGL charged premium at \$1million/\$2 million by 2%.
  - ii. Other limits available are \$250,000/\$250,000, \$500,000/\$500,000 and \$1,000,000/\$1,000,000. For these limits, multiply the premium developed for the \$100,000/\$100,000 limit by the ISO Table 3 increased limit factor.
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To broaden the pollution coverage provided for janitorial services risks only, use **Janitorial Services – Limited Pollution Amendment, PGL 40 84.** (Occurrence Version only)

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54. To provide hired and non-owned liability coverage in situations where a risk may not have any owned vehicles use **Hired and Non-Owned Liability Coverage, PGL 40 24.** (Occurrence Version only)
55. To address in the policy that the knowledge of an occurrence, claim, or suit by the agent, servant or employee of any insured will not in itself constitute knowledge of the insured unless an officer of the insured had received such notice from the agent, servant or employee use **Knowledge of Occurrence, PGL 40 40.**

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56. To amend the definition of Who Is An Insured to include any organization that an insured newly acquires or forms, other than a partnership, joint venture or limited liability company use **Newly Acquired Organization Amendment, PGL 40 45.**
57. To amend the policy to contemplate the scenario where the insured reports an occurrence to us and it later develops into an actual liability claim, failure to report the occurrence as a liability claim as such will not be considered to be in violation of the duties in the event of a claim as stated in the CGL use **Notice of Occurrence, PGL 40 50.**
58. To extend coverage for personal property of others in your care, custody or control use **Property Damage Liability Amendment, PGL 40 60.**
59. The Named Insured's failure to disclose hazards existing as of the inception date of the policy shall not by itself prejudice the coverage otherwise afforded by the policy provided such failure is not intentional. Use **Unintentional Failure to Disclose Hazards, PGL 40 65.**
60. To provide coverage for advertising expenses an insured may incur to regain customer faith and approval following a covered incident use **Good Faith Advertising Expense Endorsement, PGL 40 68** which amends the coverage given under the Limited Product Withdrawal Expense endorsement.
61. To broaden the coverage provided under Personal Advertising and Injury coverage to 1) chat rooms and bulletin boards you host; 2) advertisements, links and content to and from other Web sites; 3) Internet copyright and advertisement infringement; and 4) copyright or advertising idea/style infringement offenses committed via e-mail use **Electronic Chatrooms and Bulletin Boards Coverage, PGL 40 76.**
62. To expand the Products-Completed Operations hazard definition with respect to restaurant operations only use **Products Hazard Definition Amendment, PGL 40 74.**
63. To expand coverage by amending the automobile exclusion in include any customer's automobile under your care, custody or control while being parked or stored as part of your business use **Valet Parking Extension Endorsement, PGL 40 70.**
64. To broaden legal liability coverage for theft to include robbery, burglary, theft or mysterious disappearance of tangible property for janitorial services risks only use **Janitorial Services – Theft Legal Liability, PGL 40 82.**
65. To amend the bodily injury definition to include mental injury, use endorsement titled **Mental Injury, PGL 40 86.**

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56. To amend the definition of Who Is An Insured to include any organization that an insured newly acquires or forms, other than a partnership, joint venture or limited liability company use **Newly Acquired Organization Amendment, PGL 40 45.**
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58. To extend coverage for personal property of others in your care, custody or control use **Property Damage Liability Amendment, PGL 40 60.**
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**F. Amendment of Limits Endorsements**

The following endorsements are added:

50. The Medical Payments Limit is increased from \$5,000 to \$10,000. by using **Increased Medical Payments Limit, PGL 40 30.**
51. The limitation of \$250 is amended to no limit on the cost of bail bonds. And the loss of earnings supplementary payment is increased to \$500 from \$250. by using **Increased Supplementary Payments, PGL 40 35.**
52. Clarification regarding the exhaustion of the Each Occurrence Limit and the Personal and Advertising Injury Limit is stated in the **Amendment – Non-Cumulation of Each Occurrence Limit of Liability and Non-Cumulation of Personal and Advertising Injury Limit, PGL 40 16.**
53. To increase the Property Damage Liability aggregate limit to \$1,000,000 for janitorial services risks only, use **Janitorial Services – Property Damage Amendment, PGL 40 81.**

**43. EMPLOYEE BENEFITS LIABILITY COVERAGE**

Rule D. is deleted and replaced by the following:

**D. Premium Calculation**

1. 

| <u>Number of Employees</u> | <u>Annual Basic Limit RATE per employee</u> |
|----------------------------|---|
| First 5,000                | .090  |
| Next 5,000                 | .068  |
| Over 10,000                | .015  |
2. For limits other than the basic limit, multiply the basic limits premium by the increased/decreased limits factor from Table 2. Of ISO's Rule 56.
3. The minimum premium for this coverage is \$500, which is in addition to the Policy Writing Minimum Premium.
4. No modifications apply to the premium charged for this coverage.

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**F. Amendment of Limits Endorsements**

The following endorsements are added:

50. The Medical Payments Limit is increased from \$5,000 to \$10,000. by using **Increased Medical Payments Limit, PGL 40 30.**
51. The limitation of \$250 is amended to no limit on the cost of bail bonds. And the loss of earnings supplementary payment is increased to \$500 from \$250. by using **Increased Supplementary Payments, PGL 40 35.**
52. Clarification regarding the exhaustion of the Each Occurrence Limit and the Personal and Advertising Injury Limit is stated in the **Amendment – Non-Cumulation of Each Occurrence Limit of Liability and Non-Cumulation of Personal and Advertising Injury Limit, PGL 40 16.** ~~(Occurrence Version only)~~
53. To increase the Property Damage Liability aggregate limit to \$1,000,000 for janitorial services risks only, use **Janitorial Services – Property Damage Amendment, PGL 40 81.**

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The following Section is added:

**SECTION V – ADDITIONAL COVERAGES**

The following are used in conjunction with the ISO Program:

**1. PRINTER'S ERRORS AND OMISSION LIABILITY COVERAGE**

**A.** This coverage part provides insurance for liability arising from the insured's negligent act, error or omission in providing printing services. Use Printer's Errors and Omissions Liability Coverage Form, PGL 20 10.

**B.** Hazard Levels, Rates and Minimum Premiums

| Hazard Level                      | Correction of Work INCLUDED | Correction of Work EXCLUDED | Minimum Premium |
|-----------------------------------|-----------------------------|-----------------------------|-----------------|
| <b>Rates per \$1,000 of Sales</b> |                             |                             |                 |
| <b>Low</b>                        | <b>.108</b>                 | <b>.038</b>                 | <b>\$150.</b>   |
| <b>Medium</b>                     | <b>.180</b>                 | <b>.063</b>                 | <b>\$250.</b>   |
| <b>High</b>                       | <b>.252</b>                 | <b>.088</b>                 | <b>\$500.</b>   |

**Note:** Increased Limits Table (2) applies.

Hazard Levels Eligibility Criteria

Low Hazard:

- No print jobs prepared through typesetting work.
- No Financial documents print jobs.
- Does not use subcontractors for printing jobs.
- Includes, but is not limited to, office stationary, leaflets, flyers, non-promotional (advertising) materials, Kinko's-like printers, etc.

Medium Hazard:

- Any risk that falls outside of the eligibility criteria for High or Low Hazard risks.
- Includes, but is not limited to the following:
  - Transportation tickets (air, bus, rail, boat)
  - Tickets of admission (sporting events, theaters, amusement parks)
  - Election ballots
  - Statements (bank and annual reports)
  - Labels (directions, instructions, warning)
  - Checks – other than described in high hazard
  - Promotional material – excluding coupons and vouchers
  - Newspapers

High Hazard:

- More than 35% of print jobs are done by typeset method.
- More than 35% of revenue is generated through the printing of financial, technical, or legal work.
- More than 50% of work is subcontracted to others to print.

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**B.** Hazard Levels, Rates and Minimum Premiums

| Hazard Level                      | Correction of Work INCLUDED | Correction of Work EXCLUDED | Minimum Premium |
|-----------------------------------|-----------------------------|-----------------------------|-----------------|
| <b>Rates per \$1,000 of Sales</b> |                             |                             |                 |
| <b>Low</b>                        | <b>.108</b>                 | <b>.038</b>                 | <b>\$150.</b>   |
| <b>Medium</b>                     | <b>.180</b>                 | <b>.063</b>                 | <b>\$250.</b>   |
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- Includes, but is not limited to money orders, securities, travelers checks, drafts, stamps, coupons, pharmaceuticals, lottery tickets, drugs, traffic signs.

**2. PMA *Elite* Product**

**A. Description**

There is a charge associated with the automatic additional coverages provided in the PMA *Elite* product.

**B. Premium Determination**

To calculate the additional premium charge, multiply the total general liability premium by 3%.

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*SERFF Tracking Number:*      *STLR-125902618*      *State:*      *Arkansas*  
*First Filing Company:*      *Manufacturers Alliance Insurance Company, ...*      *State Tracking Number:*      *#? \$?*  
*Company Tracking Number:*      *08-0901-AR124*  
*TOI:*      *17.0 Other Liability-Occ/Claims Made*      *Sub-TOI:*      *17.0001 Commercial General Liability*  
*Product Name:*      *08-0901-AR124*  
*Project Name/Number:*      *Independent Rules and LCM's/08-0901-AR124*

## Supporting Document Schedules

|                               |                  |                       |            |
|-------------------------------|------------------|-----------------------|------------|
| <b>Satisfied -Name:</b>       | NAIC Transmittal | <b>Review Status:</b> |            |
| <b>Comments:</b>              |                  | Filed                 | 12/02/2008 |
| <b>Attachment:</b>            |                  |                       |            |
| NAIC Transmittal Document.pdf |                  |                       |            |

## Property &amp; Casualty Transmittal Document

|   |   |  |
|---|---|--|
| <b>1. Reserved for Insurance Dept. Use Only</b> | <b>2. Insurance Department Use only</b> |  |
|   | a. Date the filing is received:         |  |
|   | b. Analyst:                             |  |
|   | c. Disposition:                         |  |
|   | d. Date of disposition of the filing:   |  |
|   | e. Effective date of filing:            |  |
|   | New Business                            |  |
|   | Renewal Business                        |  |
|   | f. State Filing #:                      |  |
|   | g. SERFF Filing #:                      |  |
| h. Subject Codes                                |   |  |

|   |                         |               |               |                     |     |
|---|-------------------------|---------------|---------------|---------------------|-----|
| <b>3. Group Name</b>                                      | The PMA Insurance Group |               |               | <b>Group NAIC #</b> | 767 |
| <b>4. Company Name(s)</b>                                 | <b>Domicile</b>         | <b>NAIC #</b> | <b>FEIN #</b> |                     |     |
| Pennsylvania Manufacturers' Association Insurance Company | PA                      | 12262         | 23-1642962    |                     |     |
| Pennsylvania Manufacturers Indemnity Company              | PA                      | 41424         | 23-2217934    |                     |     |
| Manufacturers Alliance Insurance Company                  | PA                      | 36897         | 23-2086596    |                     |     |

|                                   |               |
|-----------------------------------|---------------|
| <b>5. Company Tracking Number</b> | 08-0901-AR124 |
|-----------------------------------|---------------|

## Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

|   |                        |                        |              |                             |
|---|------------------------|------------------------|--------------|-----------------------------|
| <b>6. Name and address</b>  | <b>Title</b>           | <b>Telephone #s</b>    | <b>FAX #</b> | <b>e-mail</b>               |
| Sharon E. Ellison<br>380 Sentry Parkway<br>P.O. Box 3031<br>Blue Bell, PA 19422 | Sr. Regulatory Analyst | 800-222-2749<br>x 5356 | 610-397-5100 | sharon_ellison@pmagroup.com |
| <b>7. Signature of authorized filer</b>   |                        |                        |              |                             |
| <b>8. Please print name of authorized filer</b>                                 |                        | Sharon E. Ellison      |              |                             |

## Filing information (see General Instructions for descriptions of these fields)

|   |  |            |          |            |
|---|--|------------|----------|------------|
| <b>9. Type of Insurance (TOI)</b>   | 17.0 Other Liability – Claims Made/Occurrence  |            |          |            |
| <b>10. Sub-Type of Insurance (Sub-TOI)</b>  | 17.0001 Commercial General Liability   |            |          |            |
| <b>11. State Specific Product code(s)(if applicable)[See State Specific Requirements]</b> |  |            |          |            |
| <b>12. Company Program Title (Marketing title)</b>  |  |            |          |            |
| <b>13. Filing Type</b>  | <input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules<br><input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms<br><input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description) |            |          |            |
| <b>14. Effective Date(s) Requested</b>  | New:   | 01/01/2009 | Renewal: | 01/01/2009 |
| <b>15. Reference Filing?</b>  | <input type="checkbox"/> Yes <input type="checkbox"/> No   |            |          |            |
| <b>16. Reference Organization (if applicable)</b>   |  |            |          |            |
| <b>17. Reference Organization # &amp; Title</b>   |  |            |          |            |
| <b>18. Company's Date of Filing</b>   | November 14, 2008  |            |          |            |
| <b>19. Status of filing in domicile</b>   | <input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved  |            |          |            |

# Property & Casualty Transmittal Document—

|     |  |               |
|-----|--|---------------|
| 20. | This filing transmittal is part of Company Tracking #  | 08-0901-AR124 |
| 21. | <b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text] |               |

We are filing to expand our currently approved Occurrence forms, rules and LCM's in your state to include Claims-Made for the following companies:

Manufacturers Alliance Insurance Company (MAICO);  
 Pennsylvania Manufacturers' Association Insurance Company (PMAIC); and  
 Pennsylvania Manufactures Indemnity Company (PMIC).

These forms, rules and LCM's will be used in conjunction with ISO's most recent Commercial General Liability forms, rules, loss costs and rating plan filings.

ISO's Division Six is designed for use with either Claims-Made or Occurrence. Therefore, the only revision needed to utilize this structure is to revise our rules by adding a clarification sentence indicating that the following forms apply to Occurrence Version only:

PGL 30 20, Limited Pollution Coverage, located on CG-CW-E-3  
PGL 40 84, Janitorial Services – Limited Pollution Amendment, located on CG-CW-E-3  
PGL 40 24, Hired and Non-Owned Liability Coverage, located on CG-CW-E-3  
PGL 40 50, Notice of Occurrence, located on CG-CW-E-4  
PGL 40 16, Amendment – Non-Cumulation of Each Occurrence Limit of Liability and  
Non-Cumulation of Personal and Advertising Injury Limit, located on CG-CW-E-5  
PGL 20 10, Printer’s Errors and Omissions Liability Coverage Form, located on CG-CW-E-6

These are the only revisions to our rule pages, CG-CW-E-1 through 7 (Edition 11.08).

These changes are applicable to all policies effective on or after January 1, 2009.

|  |   |
|--|---|
| 22.  | <b>Filing Fees</b> (Filer must provide check # and fee amount if applicable)<br>[If a state requires you to show how you calculated your filing fees, place that calculation below] |
| <p>Check #: n/a<br/>Amount: n/a</p> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p> |   |

\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

**RATE/RULE FILING SCHEDULE**

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

**(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)**

|           |  |               |
|-----------|--|---------------|
| <b>1.</b> | <b>This filing transmittal is part of Company Tracking #</b> | 08-0901-AR124 |
|-----------|--|---------------|

|           |   |     |
|-----------|---|-----|
| <b>2.</b> | <b>This filing corresponds to form filing number</b><br>(Company tracking number of form filing, if applicable) | n/a |
|-----------|---|-----|

Rate Increase

Rate Decrease

Rate Neutral (0%)

|           |  |            |
|-----------|--|------------|
| <b>3.</b> | <b>Filing Method (Prior Approval, File &amp; Use, Flex Band, etc.)</b> | File & Use |
|-----------|--|------------|

|            |   |
|------------|---|
| <b>4a.</b> | <b>Rate Change by Company (As Proposed)</b> |
|------------|---|

| Company Name   | Overall % Rate Impact | Written premium change for this program | # of policyholders affected for this program | Written premium for this program | Maximum % Change (where required) | Minimum % Change (where required) |
|--|-----------------------|---|--|----------------------------------|-----------------------------------|-----------------------------------|
| Pennsylvania Manufacturers' Association Insurance Co | 0.0%                  | 0                                       | 0  | 0                                | 0.0%                              | 0.0%                              |
| Pennsylvania Manufacturers Indemnity Co.             | 0.0%                  | 0                                       | 0  | 0                                | 0.0%                              | 0.0%                              |
| Manufacturers Alliance Insurance Co.                 | 0.0%                  | 0                                       | 0  | 0                                | 0.0%                              | 0.0%                              |

|            |  |
|------------|--|
| <b>4b.</b> | <b>Rate Change by Company (As Accepted) For State Use Only</b> |
|------------|--|

| Company Name | Overall % Rate Impact | Written premium change for this program | # of policyholders affected for this program | Written premium for this program | Maximum % Change | Minimum % Change |
|--------------|-----------------------|---|--|----------------------------------|------------------|------------------|
|              |                       |   |  |                                  |                  |                  |
|              |                       |   |  |                                  |                  |                  |

|           |  |
|-----------|--|
| <b>5.</b> | <b>Overall Rate Information (Complete for Multiple Company Filings only)</b> |
|-----------|--|

|           |  | COMPANY USE | STATE USE |
|-----------|--|-------------|-----------|
| <b>5a</b> | <b>Overall percentage rate impact for this filing</b>                  | 0.0%        |           |
| <b>5b</b> | <b>Effect of Rate Filing – Written premium change for this program</b> | 0           |           |
| <b>5c</b> | <b>Effect of Rate Filing – Number of policyholders affected</b>        | 0           |           |

|           |   |     |
|-----------|---|-----|
| <b>6.</b> | <b>Overall percentage of last rate revision</b> | n/a |
|-----------|---|-----|

|           |   |     |
|-----------|---|-----|
| <b>7.</b> | <b>Effective Date of last rate revision</b> | n/a |
|-----------|---|-----|

|           |   |     |
|-----------|---|-----|
| <b>8.</b> | <b>Filing Method of Last filing (Prior Approval, File &amp; Use, Flex Band, etc.)</b> | n/a |
|-----------|---|-----|

| <b>9.</b> | <b>Rule # or Page # Submitted for Review</b> | <b>Replacement or withdrawn?</b>   | <b>Previous state filing number, if required by state</b> |
|-----------|--|--|---|
| 1         | CG-CW-E-1 through E-7                        | <input type="checkbox"/> New<br><input checked="" type="checkbox"/> Replacement<br><input type="checkbox"/> Withdraw |   |
| 2         |  | <input type="checkbox"/> New<br><input type="checkbox"/> Replacement<br><input type="checkbox"/> Withdraw            |   |